

**BOARD OF REGISTERED NURSING**

P.O. BOX 944210, SACRAMENTO, CA 94244-2100

TDD (916) 322-1700

TELEPHONE (916) 322-3350

www.rn.ca.gov

**NURSE MIDWIFE****VERIFICATION OF PHYSICIAN SUPERVISED FURNISHING EXPERIENCE**

In order to furnish drugs and/or devices pursuant to Business and Professions Code Section 2746.51, the nurse midwife is required to have a minimum of 520 hours of physician supervised experience in furnishing drugs and/or devices. These hours may be accumulated during a period of time which is not less than six (6) months but not more than twelve (12) months within the last four (4) years since Board certification as a nurse midwife. Criteria for the furnishing experience are listed on the reverse side of this form.

<b>TO BE COMPLETED BY THE NURSE MIDWIFE</b>			
1. NAME: Last First Middle			2. BIRTHDATE: Month Day Year
3. ADDRESS: Number & Street			4. SOCIAL SECURITY NO. (Mandatory):
City Code	State	Zip	5. TELEPHONE NUMBER: ( ) ( )
6. CALIFORNIA RN LICENSE NO.:		7. BRN NURSE MIDWIFE NUMBER:	
<b>INFORMATION TO BE COMPLETED BY THE SUPERVISING PHYSICIAN</b>			
8. NAME: Last First Middle			9. TELEPHONE NUMBER: ( )
10. AGENCY NAME:			11. PHYSICIAN LICENSE NUMBER:
12. ADDRESS: Number & Street			13. SPECIALTY:
City	State	Zip Code	
14. PERIOD OF SUPERVISION		From (mo/yr):	To (mo/yr):
Number of Weeks:	Hours Per Week:	= Total No. of Hours:	
15. The drugs and/or devices furnished by the nurse midwife were:			
Incidental to the provision of perinatal care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Incidental to the provision of family planning service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Incidental to the provision of routine health care?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Furnished pursuant to a standardized procedure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
I certify, under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.			
NAME: _____		TITLE: _____	
SIGNATURE: _____		DATE: _____	

Please return the completed form to the Board of Registered Nursing at the above address.

NMF-MDEXP (11/97) (WP)

## **PHYSICIAN SUPERVISED FURNISHING EXPERIENCE**

The physician supervised furnishing experience must comply with the following requirements:

- Have a physician supervisor.
- A minimum of 520 hours of physician supervised experience in furnishing drugs and/or devices. These hours may be accumulated during a period of time which is not less than six (6) months but not greater than twelve (12) months within the last four (4) years since California Board of Registered Nursing certification as a Nurse Practitioner.
- Include furnishing of drugs and/or devices which are covered in the pharmacology course and which are related to the provision of perinatal care, family planning services and/or routine health care for essentially health clients/patients.
- Pursuant to standardized procedures.